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APPENDIX F

PROCEDURE CODES REQUIRING PRE-AUTHORIZATION BY DMAS MEDICAL SUPPORT

CPT code	Code Description Anesthesia
00402	Anesthesia for procedures on anterior integumentary system of chest, including subcutaneous tissue; reconstructive procedures on breast (e.g., reduction or augmentation mammoplasty, muscle flaps)
00938	Anesthesia for procedures on male external genitalia; insertion of penile prosthesis (perineal approach)
	Integumentary System
11970	Replacement of tissue expander with permanent prosthesis
15831	Excision, excessive skin and subcutaneous tissue (including lipectomy); abdomen (abdominoplasty)
15832	thigh
15833	leg
15834	hip
15835	buttock
15836	arm
15837	forearm or hand
15838	submental fat pad
15839	other area
19140	Mastectomy for gynecomastia
19316	Mastopexy
19318	Reduction mammaplasty
19324	Mammaplasty, augmentation; without prosthetic implant

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19325	with prosthetic implant
19328	Removal of intact mammary implant
19330	Removal of mammary implant material
19340	Immediate insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19342	Delayed insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19350	Nipple/areola reconstruction
19355	Correction of inverted nipple
19357	Breast reconstruction, immediate or delayed, with tissue expander, including subsequent expansion
19361	Breast reconstruction with latissimus dorsi flap, with or without prosthetic implant
19364	Breast reconstruction with free flap
19366	Breast reconstruction with other technique
19367	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site;
19368	with microvascular anastomosis (supercharging)
19369	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), double pedicle, including closure of donor site
19380	Revision of reconstructed breast
19396	Preparation of moulage for custom breast implant
	Musculoskeletal System
20974	Electrical stimulation to aid bone healing; noninvasive (nonoperative)
20975	invasive (operative)
21121	Genioplasty; sliding osteotomy, single piece

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21122	sliding osteotomies, two or more osteotomies (e.g., wedge resection or bone wedge reversal for asymmetrical chin)
21123	sliding, augmentation with interpositional bone graft (including obtaining autografts)
21125	Augmentation, mandibular body or angle; prosthetic material
21127	with bone graft, onlay or interpositional (including obtaining autografts)
21240	Arthroplasty, temporomandibular joint, with or without autograft (including obtaining graft)
21242	Arthroplasty, temporomandibular joint, with allograft
21243	Arthroplasty, temporomandibular joint, with prosthetic joint replacement
	Respiratory System:
30220	Insertion, nasal septal prosthesis (button)
30400	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip
30410	complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip
30420	including major septal repair
30430	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)
30435	intermediate revision (bony work with osteotomies)
30450	major revision (nasal tip work and osteotomies)
30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring, or replacement with graft
	<u>Cardiovascular System</u> :
33970	Insertion of intra-aortic balloon assist device through the femoral artery, open approach
33973	Insertion of intra-aortic balloon assist device through the ascending aorta
33975	Implantation of ventricular assist device; single ventricle support

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33976	biventricular support
	<u>Digestive System</u>
41820	Gingivectomy, excision gingiva, each quadrant
41821	Operculectomy, excision pericoronal tissues
41828	Excision of hyperplastic alveolar mucosa, each quadrant (specify)
41830	Alveolectomy, including curettage of osteitis or sequestrectomy
41870	Periodontal mucosal grafting
41872	Gingivoplasty, each quadrant (specify)
41874	Alveoloplasty, each quadrant (specify)
42145	Palatopharyngoplasty (e.g., uvulopalatopharynoplasty, uvulopharyngoplasty) note: excluding those done for congenital malformation
42280	Maxillary impression for palatal prosthesis note: excluding those done for congenital malformation
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty
43843	other than vertical-banded gastroplasty
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (less than 100 cm) Roux-en-Y gastroenterostomy
43847	with small bowel reconstruction to limit absorption
43848	Revision of gastric restrictive procedure for morbid obesity
46750	Sphincteroplasty, anal, for incontinence or prolapse; adult
46751	child
	<u>Urinary System</u>
53445	Operation for correction of urinary incontinence with placement of inflatable urethral or bladder neck sphincter, including placement of pump and/or reservoir
53447	Removal, repair, or replacement of inflatable sphincter including pump and/or reservoir and/or cuff

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53449	Surgical correction of hydraulic abnormality of inflatable sphincter device Male Genital System :
54400	Insertion of penile prosthesis; non-inflatable (semi-rigid)
54401	inflatable (self-contained)
54402	Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis
54405	Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders, and/or reservoir
54407	Removal, repair, or replacement of inflatable (multi-component) penile prosthesis, including pump and/or reservoir and/or cylinders
54409	Surgical correction of hydraulic abnormality of inflatable (multi-component) prosthesis including pump and/or reservoir and/or cylinders
55175	Scrotoplasty; simple
55180	complicated
	Eye and Ocular System
67900	Eye and Ocular System Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)
67900 67901	
	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)
67901	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material
67901 67902	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material frontalis muscle technique with fascial sling (includes obtaining fascia)
67901 67902 67903	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material frontalis muscle technique with fascial sling (includes obtaining fascia) (tarso)levator resection or advancement, internal approach
67901 67902 67903 67904	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material frontalis muscle technique with fascial sling (includes obtaining fascia) (tarso)levator resection or advancement, internal approach (tarso)levator resection or advancement, external approach
67901 67902 67903 67904 67906	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material frontalis muscle technique with fascial sling (includes obtaining fascia) (tarso)levator resection or advancement, internal approach (tarso)levator resection or advancement, external approach superior rectus technique with fascial sling (includes obtaining graft)
67901 67902 67903 67904 67906	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) Repair of blepharoptosis; frontalis muscle technique with suture or other material frontalis muscle technique with fascial sling (includes obtaining fascia) (tarso)levator resection or advancement, internal approach (tarso)levator resection or advancement, external approach superior rectus technique with fascial sling (includes obtaining graft) conjunctivo-tarso-Muller's muscle-levator resection (e.g., Fasanella-Servat type)

Removal or repair of electromagnetic bone conduction hearing device in temporal bone

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69930	Cochlear device implantation, with or without mastoidectomy
	Contact Lens Services: These codes are limited to Medicaid recipients under the age of 21 years of age
92310	Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens, both eyes, except for aphakia
92311	corneal lens for aphakia, one eye
92312	corneal lens for aphakia, both eyes
92313	corneoscleral lens
92314	Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens, both eyes except for aphakia
92315	corneal lens for aphakia, one eye
92316	corneal lens for aphakia, both eyes
92317	corneoscleral lens
92395	Supply of permanent prosthesis for aphakia; spectacles
92396	contact lenses

Orthotic Procedures:

All HCPCS codes for **orthotic procedures** must be pre-authorized. The range for these codes is L0100 through L4398.

Prosthetic Procedures:

All HCPS codes for **prosthetic procedures** must be pre-authorized. The range for these codes is L5000 through L8499

Transplant Procedures:

All **organ transplants** must be preauthorized except for corneal.

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TRANSPLANT PROCEDURE CODE:

ANESTHESIA:

00580	Anesthesia for heart transplant or heart/lung transplant
00796	Anesthesia for intraperitoneal procedures in upper abdomen including laparoscopy; liver transplant (recipient)
00862	Anesthesia for extraperitoneal procedures on lower abdomen, including urinary tract; renal procedures, including upper 1/3 of ureter, or donor nephrectomy
00868	renal transplant (recipient)
01990	Physiological support for harvesting of organ(s) from brain-dead patient
LUNG:	
32850 (cadav	Donor pneumonectomy(ies) with preparation and maintenance of allograft ver)
32851	Lung transplant, single, without cardiopulmonary bypass
32852	with cardiopulmonary bypass
32853	Lung transplant, double (bilateral sequential or en bloc); without cardiopulmonary bypass
32854	with cardiopulmonary bypass
HEART:	
33930	Donor cardiectomy-pneumonectomy, with preparation and maintenance of allograft
33935	Heart-lung transplant with recipient cardiectomy-pneumonectomy
33940	Donor cardiectomy, with preparation and maintenance of allograft
33945	Heart transplant, with or without recipient cardiectomy

BONE MARROW:

38230 Bone marrow harvesting for transplantation

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38231	Blood-derived peripheral stem cell harvesting for transplantation, per collection
38240	Bone marrow or blood-derived peripheral stem cell transplantation; allogenic
38241	autologous
LIVER:	
47133	Donor hepatectomy, with preparation and maintenance of allograft; from cadaver donor
47134	partial, from living donor
47135	Liver allotransplantation; orthotopic, partial or whole, from cadaver or living donor, any age
47136	heterotopic, partial or whole, from cadaver or living donor, any age
PANCREA	S:
48160	Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islets
48550	Donor pancreatectomy, with preparation and maintenance of allograft from cadaver donor, with or without duodenal segment for transplantation
48554	Transplantation of pancreatic allograft
KIDNEY:	
50300	Donor nephrectomy, with preparation and maintenance of allograft; from cadaver donor, unilateral or bilateral
50320	from living donor
50340	Recipient nephrectomy (separate procedure)
50360	Renal allotransplantation, implantation of graft; excluding donor and recipient nephrectomy
50365	with recipient nephrectomy

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50380 Renal autotransplantation, reimplantation of kidney **PARATHYROID:**

Parathyroid autotransplantation

From ICD-9 Procedure Codes:

THYROID:

06.94 Thyroid tissue reimplantation

PARATHYROID:

06.95 Parathyroid tissue reimplantation

THYMUS:

07.94 Transplantation of thymus

LUNG:

33.5	Lung transplant
33.50	Lung transplantation, not otherwise specified
33.51	Unilateral lung transplantation
33.52	Bilateral lung transplantation
33.6	Combined heart-lung transplantation

HEART:

Combined heart-lung transplantation

37.5 Heart transplantation

BONE MARROW:

41.0 Bone marrow or hematopoietic stem cell transplant

41.00 Bone marrow transplant, not otherwise specified

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41.01	Autologous bone marrow transplant
41.02	Allogeneic bone marrow transplant with purging
41.03	Allogeneic bone marrow transplant without purging
41.04	Autologous hematopoietic stem cell transplant
41.05	Allogeneic hematopoietic stem cell transplant
41.06	Cord blood stem cell transplant
41.91	Aspiration of bone marrow from donor for transplant
SPLEEN:	
41.94	Transplantation of spleen
LIVER:	
50.5	Liver transplant
50.51	Auxiliary liver transplant
50.59	Other liver transplant of liver
PANCREAS	:
52.8	Transplant of pancreas
52.80	Pancreatic transplant, not otherwise specified
52.81	Reimplantation of pancreatic tissue
52.82	Homotransplant of pancreas
52.83	Heterotransplant of pancreas
52.84	Autotransplantation of cells of Islets of Langerhans
52.85	Allotransplantation of cells of Islets of Langerhans
52.86	Transplantation of cells of Islets of Langerhans, not otherwise specified
KIDNEY:	

Transplant of kidney

55.6

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55.61	Renal autotransplantation
55.69	Other kidney transplantation
55.97	Implantation or replacement of mechanical kidney